2.								
101	PE	PART B	- FEE(S)	TRA	NSMITTAL			
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INSTRUCTIONS This for appropriate. All further coindicated unless corrected maintenance fee notification	rm should be used for tran riespondence including the below or directed otherwise ns.	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and ders and noti) specifying	PUBLIC fication a new c	CATION FEE (if requ of maintenance fees v correspondence address	will be mailed to the curren ; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for	
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BRINKS HOFER GILSON & LIONE P.O. BOX 10395					I hereby certify that t	rtificate of Mailing or Tran his Fee(s) Transmittal is bein with sufficient postage for fi	smission ng deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below.	
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FC:1501 1330.00 OP FC:1504 300.00 OP					James P. Naug	hton, Reg. No. 30,6	,	
FC:8001	9.00 OP				James 9	2 F. Naug Va 13/04	(Signature)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/739,586	12/18/2000 Noboru Yamaz			'amazal	ki	9333/253	3534	
FITLE OF INVENTION: N	IAVIGATION SYSTEM							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330			\$300	\$1630	10/08/2004	
EXAMINER		ART UN	ART UNIT		LASS-SUBCLASS	1		
BROADHEAD, BRIAN J		3661			701-211000	_		
	e address or indication of "Fe	ee Address" (37	•	_	the patent front page, l	, DIATINA	HOFER GILSON & LIONE	
CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a					
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3					
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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						UNTRY)		
Alpine Electronics, Inc. Toyko, JAPAN								
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the p	atent);	🗅 individual 🕱	corporation or other private g	roup entity government	
la. The following fee(s) are	enclosed:	41	Payment of	• • •	. 64 6 ():			
				☑ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.				
△ Advance Order - # of	• •		•	•			credit any overpayment, to copy of this form).	
. Change in Entity Status	(from status indicated above	e)					<u> </u>	
a. Applicant claims SM	MALL ENTITY status. See 3	7 CFR 1.27.	☐ b. Applica	nt is no	t claiming SMALL EN	TITY status. See, e.g., 37 CI	FR 1.27(g)(2).	
NOTE: The Issue Fee and P		vill not be accepted	d from anyone	• -		ly paid issue fee to the applic sistered attorney or agent; or	eation identified above. the assignee or other party in	
Authorized Signature)	Lames P. Nou	ighter.		9/	3/04	,		
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